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CR2E034 (5/01)

_		RM BUSINESS	REPORT	(UBR
DOCUN	MENT#	P990001022	281	

KOVE RESTAURANT ENTERPRISES INC

Principal Place of Business 10135 US HWY. 441 BELLEVIEW FL 34420

1. Entity Name

Mailing Address 10135 US HWY. 441 BELLEVIEW FL 34420

2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc.

## FILED Sep 19, 2001 8:00 am Secretary of State 09-19-2001 90160 018 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

7. Name and Address of New Registered Agent

City & State		City & State		4. FEI Number 59-3608232		Applied For
						Not Applicable
Zip	Country	Zip	Country	5. Certificate of Status Desired		.75 Additional

6." Name and Address of Current Registered Agent

LUNDELIUS, WALTER D SR. 9946 N.W. 49 TERR. MIAMI FL 33178-1919

Street Address (P.O. Box Number is Not Acceptable)

5 Nonth Best Point

City\_NUCRNESS

34950

8. The above named entity submits this statement for the $\mathfrak{F}_{\mathbb{C}^n}$	ne purpose of changi	ing its registered office or registered age	ent, or both, in the State of Florida.	
SIGNATURE	1			<i>e</i>
Signature, typed or printed name of registered agent and	title if applicable.	(NOTE: Registered Agent signature required when re	instating) DATE	
9. This corporation is eligible to satisfy its Intangible	1	IOW!!! FEE IS \$550.00	10. Election Campaign Financing	\$5.00 May Be

Tax filing i	oration is eligible to satisfy its Intangible requirement and elects to do so. ria on back)	After September 12, : Make Check Payable		e \$750.00	10. Election Campaign Fina Trust Fund Contribution.		\$5.00 Ma Added to Fe	y Be les
11.	OFFICERS AND DIS	RECTORS	12.	AD	DITIONS/CHANGES TO OFFIC	ERS AND DIREC	TORS IN 1	1
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KOVELESKY, BARRY 4451 SE 17TH AVE. OCALA FL 34480	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			□ Cr	ange 🔲 /	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP KOVELESKY, MARLENE 4451 SE 17TH AVE. OCALA FL 34480	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			□ cr	. –	Addition
TITLE NAME - STREET ADDRESS CITY-ST-ZIP	S LUNDELIUS, WALTER D SR. 9946 NW 49TH TERR. MIAMI FL 33178-1919	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	5 N	vonth Best Po venuess A.	3445C	ange	Addition
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TITLE NAME STREET ADDRESS		☐ Delete	TITLE NAME STREET ADDRESS CITY_ST_TIP			<u> </u>	ange 🗆 F	Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered of execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all first like empowered.

SIGNATURE:

Dot 999000 10 2281 BDUS933

## Walter D. Lundelius, Sr. 5 North Best Point Inverness Florida 34450

September 10, 2001

Secretary of State, Katherine Harris Division of Corporations PO Box 6327 Tallahassee FL 32314

RE: Kove Restaurant Enterprises Inc Document # P99000102281

Dear Ms Harris;

Due to our moving and changing address the Renewal Notice and the first Delinquent Notice were never received.

Please forgive our oversight of this matter and abate the penalties assessed, and make the necessary corrections to the address of the Registered Agent as noted.

Thank you for you help and attention to this matter.

Sincerely,

Walter D Lundelius, Sr.

Registered Agent

Kove Restaurant Enterprises Inc.

Dear Ms Harris: